

**TECHNICAL SUPPLEMENT 4:
SOURCE DEFINITION OF PAYER CODES**

TABLE OF CONTENTS

SOURCE DEFINITION OF PAYER CODES	2
ARIZONA	4
1995-1997	4
CALIFORNIA	5
1995-1997	5
COLORADO	6
1995-1997	6
FLORIDA	7
1995-1996	7
1997	8
IOWA	9
1995-1997	9
MARYLAND	10
1995	10
1996-1997	11
MASSACHUSETTS	12
1995	12
1996-1997	13
NEW JERSEY	14
1995-1997	14
NEW YORK	20
1995	20
1996-1997	21
OREGON	22
1995-1997	22
SOUTH CAROLINA	23
1995-1997	23
WASHINGTON	24
1995-1997	24
WISCONSIN	25
1995-1997	25

SOURCE DEFINITION OF PAYER CODES

In HCUP payer codes are assigned at three different levels of aggregation:

- PAYn_X contains the detailed definitions of payers as received from the data source;
- PAYn_N contains uniform definitions of payers recoded from the source's codes, but at a level of aggregation that still results in considerable non-uniformity across states; and
- PAYn contains uniform definitions designed to vary little across the states.

The designation PAY1, PAY2, or PAY3 refer, respectively, to primary, secondary, and tertiary payers.

This technical supplement documents the way in which source-specific payer codes — PAYn_X — were mapped into HCUP uniform coding of expected primary and secondary payers. The HCUP inpatient data include two versions of payer variables for expected primary and secondary payers: six-category variables PAY1 and PAY2, and more detailed twelve-category variables PAY1_N and PAY2_N. Generally, the source payer codes are mapped into the detailed variables PAY1_N and PAY2_N, and are then collapsed into PAY1 and PAY2.

For each data source, a table shows the mapping of source payer codes (PAYn_X) to PAY1_N and PAY2_N. Tables include:

- source description of payer codes,
- source values (the values of PAYn_X),
- HCUP uniform values, and
- HCUP description of payer categories.

Unless otherwise noted, PAY1 and PAY2 were created from PAY1_N and PAY2_N. The following table specifies the relationship between PAY1/PAY2 and PAY1_N/PAY2_N.

Mapping PAY1/PAY2 from PAY1_N/PAY2_N

PAY1 and PAY2		PAY1_N and PAY2_N	
Value	Description	Value	Description
1	Medicare	1	Medicare
2	Medicaid	2	Medicaid
3	Private insurance	3	Blue Cross, Blue Cross PPO
		4	Commercial, PPO
		5	Alt Delivery System (HMO, PHP, etc.)
4	Self-pay	6	Self-pay
5	No charge	7	No charge
6	Other	8	Title V
		9	Workers' Compensation
		10	CHAMPUS, CHAMPVA
		11	Other government
		12	Other
.	Missing	.	Missing
.A	Invalid	.A	Invalid
.B	Unavailable from source	.B	Unavailable from source

ARIZONA 1995-1997

Expected Primary Payer

PAY1_N

Source Description	Source Values	Uniform Values	HCUP Description
Medicare; Medicare Risk	05,11	1	Medicare
AHCCCS Health Care Group;			
AHCCCS/Medicaid	04, 06	2	Medicaid
	N/A	3	Blue Cross, Blue Cross PPO
Commercial (Indemnity); PPO	01, 03	4	Commercial, PPO
HMO	02	5	HMO, PHP, etc.
Self Pay	00	6	Self-pay
Charity	12	7	No charge
	N/A	8	Title V
Workers' Compensation	09	9	Workers' Comp
CHAMPUS/ MEDEXCEL	07	10	CHAMPUS, CHAMPVA
Children's Rehabilitation Services; Indian			
Health Services	08, 10	11	Other government
Foreign National; Other	13,14	12	Other
	Blank	(.)	Missing
	Other Values	(.A)	Invalid

Expected Secondary Payer

PAY2_N

Not available from this data source (.B).

CALIFORNIA 1995-1997

Expected Primary Payer

PAY1_N

Source Description	Source Values	Uniform Values	HCUP Description
Medicare (even if HMO and PPO)	01	1	Medicare
Medi-Cal (even if HMO and PPO)	02	2	Medicaid
Blue Cross/Blue Shield (not HMO, not PPO)	10	3	Blue Cross, Blue Cross PPO
PPO; Private insurance company (not HMO, not PPO)	08, 09	4	Commercial, PPO
HMO	07	5	HMO, PHP, etc.
Self-pay	11	6	Self-pay
Charity care;			
No charge	12, 13	7	No charge
	N/A	8	Title V
Workers' Compensation	03	9	Workers' Comp
CHAMPUS/CHAMPVA/VA	05	10	CHAMPUS, CHAMPVA
County indigent programs; Other governmental	04, 06	11	Other government
Other non-governmental	14	12	Other
	00, Blank	(.)	Missing
	Other Values	(.A)	Invalid

Expected Secondary Payer

PAY2_N

Not available from this data source (.B).

COLORADO 1995-1997

Expected Primary Payer

PAY1_N

Source Description	Source Values	Uniform Values	HCUP Description
Medicare	04	1	Medicare
Medicaid	05	2	Medicaid
Blue Cross/Blue Shield	01	3	Blue Cross, Blue Cross PPO
Commercial insurance/ Indemnity plans/ Self-insured; Other liability insurance/ No fault/ Casualty	02, 03	4	Commercial, PPO
HMO-PPO /Managed Care/ Discounted	08	5	HMO, PHP, etc.
Self-pay	12	6	Self-pay
No charge/ Charity/ Research	13	7	No charge
	N/A	8	Title V
Workers' Comp	06	9	Workers' Comp
CHAMPUS	09	10	CHAMPUS, CHAMPVA
Other government; Colorado Medically Indigent	11, 15	11	Other government
1995-1996: Other	14	12	Other
Unknown	Blank	(.)	Missing
Starting in 1996: Missing	00	(.)
	Missing		
	Other Values	(.A)	Invalid

Expected Secondary Payer

PAY2_N

Not available from this data source (.B).

FLORIDA 1995-1996

Expected Primary Payer

PAY1_N

Source Description	Source Values	Uniform Values	HCUP Description
Medicare, Medicare HMO	A, B	1	Medicare
Medicaid, Medicaid HMO	C, D	2	Medicaid
	N/A	3	Blue Cross, Blue Cross PPO
Commercial insurance (includes self-insured and Blue Cross/Blue Shield);			
Commercial PPO	E, G	4	Commercial, PPO
Commercial HMO	F	5	HMO, PHP, etc.
Self-pay, charity, underinsured	L	6	Self-pay
	N/A	7	No charge
	N/A	8	Title V
Workers' Compensation	H	9	Workers' Comp
CHAMPUS; VA	I, J	10	CHAMPUS, CHAMPVA
Other state/local government	K	11	Other government
Other	M	12	Other
	Blank	(.)	Missing
	Other values	(.A)	Invalid

Expected Secondary Payer

PAY2_N

Not available from this data source (.B).

FLORIDA 1997

Expected Primary Payer

PAY1_N

Source Description	Source Values	Uniform Values	HCUP Description
Medicare, Medicare HMO	A, B	1	Medicare
Medicaid, Medicaid HMO	C, D	2	Medicaid
	N/A	3	Blue Cross, Blue Cross PPO
Commercial insurance (includes self-insured and Blue Cross/Blue Shield);			
Commercial PPO	E, G	4	Commercial, PPO
Commercial HMO	F	5	HMO, PHP, etc.
Self-pay, charity, underinsured	L	6	Self-pay
Charity	N	7	No charge
	N/A	8	Title V
Workers' Compensation	H	9	Workers' Comp
CHAMPUS; VA	I, J	10	CHAMPUS, CHAMPVA
Other state/local government	K	11	Other government
Other	M	12	Other
	Blank	(.)	Missing
	Other values	(.A)	Invalid

Expected Secondary Payer

PAY2_N

Not available from this data source (.B).

IOWA 1995-1997

Expected Primary Payer

PAY1_N

Source Description	Source Values	Uniform Values	HCUP Description
Medicare (Title 18)	01	1	Medicare
Medicaid (Title 19)	02	2	Medicaid
Blue Cross (of Iowa, Western Iowa, or other state Blue Cross plans)	06	3	Blue Cross, Blue Cross PPO
Commercial (private or group)	07	4	Commercial, PPO
	N/A	5	HMO, PHP, etc.
Self-pay or relative	08	6	Self-pay
	N/A	7	No charge
	N/A	8	Title V
Workers' Compensation	09	9	Workers' Comp
	N/A	10	CHAMPUS, CHAMPVA
Other state; county (Including state papers); Other federal government (Including CHAMPUS, Veterans, Title V, Railroad, Hill-Burton, Crippled Children, etc.)	03, 04, 05	11	Other Government
	N/A	12	Other
	Blank	(.)	Missing
	Other Values	(.A)	Invalid

Expected Secondary Payer

PAY2_N

Not available from this data source (.B).

MARYLAND 1995

Expected Primary and Secondary Payer

PAY1_N and PAY2_N

Source Description	Source Values	Uniform Value	HCUP Description
Medicare	1	1	Medicare
Medicaid;			
Medicaid (state only);			
Medicaid HMO	2, 13, 14	2	Medicaid
Blue Cross	4	3	Blue Cross, Blue Cross PPO
Commercial insurance	5	4	Commercial, PPO
HMO	12	5	HMO, PHP, etc.
Self-pay	8	6	Self-pay
Charity	9	7	No charge
Title V	3	8	Title V
Workers'			
Compensation	7	9	Workers' Comp
	N/A	10	CHAMPUS, CHAMPVA
Other government			
program	6	11	Other government
Other; Donor	10, 11	12	Other
Primary Payer			
Unknown; missing	99, blank	(.)	Missing
Secondary Payer			
Unknown; not			
applicable; missing	99, 77, blank	(.)	Missing
	Other Values	(.A)	Invalid

MARYLAND 1996-1997

Expected Primary and Secondary Payer

PAY1_N and PAY2_N

Source Description	Source Values	Uniform Value	HCUP Description
Medicare; Medicare HMO	1, 15	1	Medicare
Medicaid; Medicaid HMO	2, 14	2	Medicaid
Blue Cross; Blue Cross NCA; Blue Cross - other State	4, 16, 17	3	Blue Cross, Blue Cross PPO
Commercial insurance	5	4	Commercial, PPO
HMO	12	5	HMO, PHP, etc.
Self-pay	8	6	Self-pay
Charity	9	7	No charge
Title V	3	8	Title V
Workers' Compensation	7	9	Workers' Comp
	N/A	10	CHAMPUS, CHAMPVA
Other government program	6	11	Other government
Other; Donor	10, 11	12	Other
Primary Payer Unknown; missing	99, blank	(.)	Missing
Secondary Payer Unknown; not applicable; missing	99, 77, blank	(.)	Missing
	Other Values	(.A)	Invalid

MASSACHUSETTS 1995

Expected Primary and Secondary Payer

PAY1_N and PAY2_N

Source Description	Source Values	Uniform Value	HCUP Description
Medicare; Medicare managed care	3, F	1	Medicare
Medicaid; Medicaid managed care	4, B	2	Medicaid
Blue Cross; Blue Cross managed care	6, C	3	Blue Cross, Blue Cross PPO
Commercial insurance; Commercial managed care	7, D	4	Commercial, PPO
HMO	8	5	HMO, PHP, etc.
Self-pay	1	6	Self-pay
Free care (no charge)	9	7	No charge
	N/A	8	Title V
Workers' Compensation	2	9	Workers' Comp
	N/A	10	CHAMPUS, CHAMPVA
Other government payment	5	11	Other government
Primary Payer:			
Other non-managed care; PPO and other managed care not listed elsewhere	0, E	12	Other
Secondary Payer:			
Other non-managed care; Other or principal source of payment covered in full; PPO and other managed care not listed elsewhere	0, A, E	12	Other
Primary Payer:	Blank	(.)	Missing
Secondary Payer:			
None	"N", blank	(.)	Missing
	Other values	(.A)	Invalid

MASSACHUSETTS 1996-1997

Expected Primary and Secondary Payer

PAY1_N and PAY2_N

Source Description	Source Values	Uniform Value	HCUP Description
Medicare; Medicare managed care	3, F	1	Medicare
Medicaid; Medicaid managed care	4, B	2	Medicaid
Blue Cross; Blue Cross managed care	6, C	3	Blue Cross, Blue Cross PPO
Commercial insurance; Commercial managed care; PPO and other managed care not listed elsewhere	7, D, E	4	Commercial, PPO
HMO; Point of Service (added 4th Qtr 1997)	8, J	5	HMO, PHP, etc.
Self-pay	1	6	Self-pay
Free care (no charge)	9	7	No charge
	N/A	8	Title V
Workers' Compensation	2	9	Workers' Comp
	N/A	10	CHAMPUS, CHAMPVA
Other government payment	5	11	Other government
Primary Payer:			
Other non-managed care	0	12	Other
Secondary Payer:			
Other non-managed care; Other or principal source of payment covered in full	0, A	12	Other
Primary Payer:	Blank	(.)	Missing
Secondary Payer:	Blank	(.)	Missing
	Other values	(.A)	Invalid

NEW JERSEY 1995-1997

Expected Primary and Secondary Payer

PAY1_N and PAY2_N

Source Description	Source Values	Uniform Values	HCUP Description
Medicare	011, 015, 017	1	Medicare
Medicaid	012	2	Medicaid
Blue Cross insurance	See "New Jersey Pay Codes" (page 15)	3	Blue Cross, Blue Cross PPO
Commercial insurance; Union insurance	See "New Jersey Pay Codes" (page 15), 091	4	Commercial, PPO
HMO/PHP	See "New Jersey Pay Codes" (page 15)	5	HMO, PHP, etc.
Direct; Other source of patient pay; Beginning 1993: Indigent	031, 039, 095	6	Self-pay
Hospital responsibility	098	7	No charge
Title V	013	8	Title V
Workers' Compensation	205, 211, 215, 221, 225, 231, 299	9	Workers' Comp
CHAMPUS	014	10	CHAMPUS, CHAMPVA
Department of Vocational Rehab- ilitation; New Jersey State Health Benefits Plan; Other government	016, 018, 019	11	Other government
Personnel health program; Other	092, 099	12	Other
Primary Payer:	Blank	(.)	Missing
Secondary Payer:	Blank, 000	(.)	Missing
	Other Values	(.A)	Invalid

NEW JERSEY PAY CODES

The following is the complete list of valid payer codes.

PAY1_N/ PAY2_N	SOURCE VALUES	SOURCE DESCRIPTION
3	010	Blue Cross: Alabama
1	011	Title XVIII (Medicare) Part A
2	012	Title XIX (Medicaid)
8	013	Title V (Maternal and Child Health)
10	014	CHAMPUS
1	015	Title XVIII (Medicare) Part B
11	016	Department of Vocational Rehabilitation
1	017	Title XVIII (Medicare) Part B, physician charges
11	018	New Jersey State Health Benefits Plan
11	019	Other Government
3	020	Blue Cross: Arkansas
3	022	Blue Cross: New Jersey, FEP
3	025	Blue Cross: New Jersey, Garden State
3	026	Blue Cross: New Jersey, Host
3	029	Blue Cross: Other Blue Cross
3	030	Blue Cross: Arizona
6	031	Patient, Direct
5	032	HMO: Americaid Inc. (Valid beginning 11/08/96)
5	033	HMO: Americaid Preferred Provider Plan (Valid beginning 11/08/96)
5	034	HMO: United Healthcare (Valid beginning 1/01/97)
5	035	HMO Blue: Medigroup, Inc. (Valid beginning 1/01/97)
6	039	Patient, Other Source of Patient Pay
3	040	Blue Cross: California Blue Cross: California, all other groups (valid for 1994) Blue Cross: California, Woodland Hills (valid for 1988-1993)
3	041	Blue Cross: California, Oakland (1994 discharges only)
3	042	Blue Cross: California, San Francisco (1994 discharges only)
5	043	HMO: Crossroads Health Plan (1994 discharges only)
5	044	HMO: Cumberland Regional Health Plan (1994 discharges only)
5	045	HMO: HIP/RHP of New Jersey (Formerly Health Care Plan of New Jersey)
5	046	HMO: HIP of Greater New Jersey (1994 discharges only)
5	047	HMO: Blue (Medigroup-Central) (Formerly Mercer Regional Medical Group)
5	048	HMO: HMO of PA/NJ (U.S. Healthcare)
5	049	HMO: Rutgers Community Health Plan (1994 discharges only)
3	050	Blue Cross: Colorado
5	051	HMO: Southern Inter-County Medical Association (1994 only)
5	052	HMO: Valley Health Plan (1994 discharges only)
5	053	HMO: Aeta Health Plans of New Jersey
5	054	HMO of New Jersey (1994 discharges only)
5	055	HMO: OmniCare (1994 discharges only)
5	056	HMO: CIGNA Health Plan of New Jersey (Formerly Co. Med., Inc.)
5	057	HMO: Bergen County IPA (1994 discharges only)

NEW JERSEY PAY CODES - continued

PAY1_N/ PAY2_N	SOURCE VALUES	SOURCE DESCRIPTION
5	058	HMO: South Shore Health Plan
5	059	HMO: Other HMO
3	060	Blue Cross: Connecticut
5	061	HMO: Travelers Health Plan
5	062	HMO: Garden State Health Plan
5	063	HMO of Pennsylvania (1994 discharges only)
5	064	HMO: Prucare (1994 discharges only)
5	065	HMO: Maxicare (1994 discharges only)
5	066	HMO: Blue Medigroup - Metro, Inc.
5	067	HMO: Blue Medigroup - North, Inc.
5	068	HMO: Blue Medigroup - South, Inc.
5	069	HMO: Blue Medigroup - Shoreline, Inc.
3	070	Blue Cross: Delaware
5	071	HMO: Metlife Health Care Network
5	072	HMO: Oxford Health Plan
5	073	HMO: Sanus of New Jersey
5	074	HMO: CIGNA Health Plan of Southern New Jersey (Formerly CIGNA Health Plan)
5	075	HMO: Corporate Health Administrators (1994 discharges only)
5	076	HMO: Premier Preferred Care of New Jersey (valid beginning 1/93)
5	077	HMO: Greater Atlantic Health Services (valid beginning 1/95)
5	078	HMO: Delaware Valley HMO (valid beginning 1/95)
3	080	Blue Cross: District of Columbia
5	081	HMO: Atlanticare Health Plan (Valid beginning 11/08/96)
5	082	HMO: ChubbHealth Plan (Valid beginning 11/08/96)
5	083	HMO: Community Health Care & Development Corp (Valid beginning 11/08/96)
5	084	HMO: First Option Health Plan (Valid beginning 11/08/96)
5	085	HMO: Harmony Health Plan (Valid beginning 11/08/96)
5	086	HMO: HMO Blue (Blue Cross/Blue Shield of New Jersey) (Valid beginning 11/08/96)
5	087	HMO: Liberty Health Plan (Valid beginning 11/08/96)
5	088	HMO: Managed Health Care Systems of New Jersey, Inc. (Valid beginning 11/08/96)
5	089	HMO: Physician Helth Care Plan of New Jersey (Valid beginning 11/08/96)
3	090	Blue Cross: Florida
4	091	Misc: Union Insurance
12	092	Misc: Personnel Health Program
4	093	Misc: Magnet (Magna Care) (valid beginning 1/95)
5	094	HMO: Physician Health Services of New Jersey, Inc. (Valid beginning 11/08/96)
6	095	Misc: Indigent (valid beginning 1/93)
11	095	Misc: Indigent (valid for 1988-1992)
4	096	Misc: Qual Care (valid beginning 11/08/96)
5	097	HMO: University Health Plans, Inc. (valid beginning 11/08/96)
7	098	Misc: Hospital Responsibility

NEW JERSEY PAY CODES - continued

PAY1_N/ PAY2_N	SOURCE VALUES	SOURCE DESCRIPTION
12	099	Misc: Other
3	100	Blue Cross: Georgia Blue Cross: Georgia, all other groups (valid for 1994) Blue Cross: Georgia, Atlanta (valid for 1988-1993)
3	101	Blue Cross: Georgia, Columbus (1994 discharges only)
4	105	Commercial: Aeta
4	106	Commercial: New Jersey Carpenters' Health Fund
4	107	AARP (valid beginning 4/1/95)
3	110	Blue Cross: Idaho
4	115	Commercial: Connecticut General
4	120	Commercial: Continental Assurance
3	121	Blue Cross: Illinois
4	125	Commercial: Equitable
3	130	Blue Cross: Indiana
4	131	Commercial: Guardian Life
4	135	Commercial: Intercontinental
3	140	Blue Cross: Iowa Blue Cross: Iowa, all other groups (valid for 1994) Blue Cross: Iowa, not Sioux City (valid for 1988-1993)
3	141	Blue Cross: Iowa, Sioux City (1994 discharges only) Blue Cross: Iowa, Sioux City South Dakota (valid for 1988-1993)
4	142	Commercial: John Hancock
4	145	Commercial: Massachusetts Mutual
3	150	Blue Cross: Kansas
4	151	Commercial: Metropolitan Life
4	155	Commercial: Mutual of Omaha
3	160	Blue Cross: Kentucky
4	161	Commercial: New York Life
4	165	Commercial: Provident Alliance
3	170	Blue Cross: Louisiana
4	171	Commercial: Prudential
4	175	Commercial: Travelers
3	180	Blue Cross: Maine
4	181	Commercial: Washington National Insurance
4	185	Commercial: New Jersey Auto Dealers Association
4	186	Commercial: Allstate (formerly Companion Life)
4	187	Commercial: Mutual Life of New York
4	188	Commercial: National Association of Letter Carriers
4	189	Commercial: Local Union Insurance
3	190	Blue Cross: Maryland
4	191	Commercial: Lincoln National
4	192	Commercial: New Jersey Turnpike Authority
4	193	Commercial: Rasmussen
4	194	Commercial: InterCounty Health Plan
4	195	Commercial: American Postal Workers
4	196	Commercial: Leader Administrators
4	197	Commercial: Fred S. James (James Benefit)
4	198	Commercial: Mail Handlers Benefit Plan
4	199	Commercial: Other Commercial Insurance

NEW JERSEY PAY CODES - continued

PAY1_N/ PAY2_N	SOURCE VALUES	SOURCE DESCRIPTION
3	200	Blue Cross: Massachusetts
9	205	Workers' Comp: Aeta
3	210	Blue Cross: Michigan
9	211	Workers' Comp: Insurance Company of North America
9	215	Workers' Comp: Liberty Mutual
3	220	Blue Cross: Minnesota
9	221	Workers' Comp: Employers Mutual
9	225	Workers' Comp: New Jersey Manufacturers
3	230	Blue Cross: Mississippi
9	231	Workers' Comp: Travelers
3	240	Blue Cross: Missouri, Kansas City
3	241	Blue Cross: Missouri, St. Louis
3	250	Blue Cross: Montana
3	260	Blue Cross: Nebraska
3	265	Blue Cross: Nevada
3	270	Blue Cross: New Hampshire
3	280	Blue Cross: New Jersey, All Other Groups
3	281	Blue Cross: New Jersey, Non-Group Line of Business (valid beginning 1/93)
3	290	Blue Cross: New Mexico
9	299	Workers' Comp: Other Workers' Compensation
3	300	Blue Cross: New York, Albany (1994 discharges only)
3	301	Blue Cross: New York, Buffalo
3	303	Blue Cross: New York, New York
3	304	Blue Cross: New York, Rochester
3	305	Blue Cross: New York, Syracuse
3	306	Blue Cross: New York, Utica
3	307	Blue Cross: New York, Watertown (1994 discharges only)
3	308	Blue Cross: New York, Part A Only (1994 discharges only)
4	309	No Fault: Allstate
3	310	Blue Cross: North Carolina
4	311	No Fault: New Jersey Manufacturers
4	315	No Fault: State Farm
3	320	Blue Cross: North Dakota
3	331	Blue Cross: Ohio, Canton (1994 discharges only)
3	332	Blue Cross: Ohio, Cincinnati
3	333	Blue Cross: Ohio, Cleveland
3	334	Blue Cross: Ohio, Columbus (1994 discharges only)
3	335	Blue Cross: Ohio, Lima (1994 discharges only)
3	337	Blue Cross: Ohio, Toledo (1994 discharges only)
3	338	Blue Cross: Ohio, Youngstown (1994 discharges only)
3	340	Blue Cross: Oklahoma
3	350	Blue Cross: Oregon
3	360	Blue Cross: Pennsylvania, Allentown (1994 discharges only)
3	361	Blue Cross: Pennsylvania, Harrisburg
3	362	Blue Cross: Pennsylvania, Philadelphia
3	363	Blue Cross: Pennsylvania, Pittsburgh
3	364	Blue Cross: Pennsylvania, Wilkes-Barre
3	370	Blue Cross: Rhode Island

NEW JERSEY PAY CODES - continued

PAY1_N/ PAY2_N	SOURCE VALUES	SOURCE DESCRIPTION
3	380	Blue Cross: South Carolina
3	390	Blue Cross: Tennessee, Chattanooga
3	392	Blue Cross: Tennessee, Memphis
4	399	No Fault: Other No Fault
3	400	Blue Cross: Texas
3	410	Blue Cross: Utah
3	415	Blue Cross: Vermont
3	423	Blue Cross: Virginia, all other groups (Formerly Blue Cross: Virginia, Richmond)
3	424	Blue Cross: Virginia, Roanoke (1994 discharges only)
3	430	Blue Cross: Alaska/Washington (Formerly, Alaska/Washington, all other groups)
3	441	Blue Cross: West Virginia, Charleston (1994 discharges only)
3	443	Blue Cross: West Virginia, Parkersburg
3	444	Blue Cross: West Virginia, Wheeling (1994 discharges only)
3	450	Blue Cross: Wisconsin
3	460	Blue Cross: Wyoming
3	470	Blue Cross: Puerto Rico
3	471	Blue Cross: Hawaii, all other groups (valid beginning 1/93)
3	865	Blue Cross: Camp Hill (valid beginning 1/95)
3	932	Blue Cross: Washington, Seattle (1994 discharges only)
3	936	Blue Cross: Washington, Spokane (1994 discharges only)
3	971	Blue Shield: Hawaii (1994 discharges only)

NEW YORK 1995

Expected Primary and Secondary Payer

PAY1_N and PAY2_N

Source Description	Source Values	Uniform Value	HCUP Description
Medicare, Medicare HMO	03, 16	1	Medicare
Medicaid, Medicaid HMO	04, 17	2	Medicaid
Blue Cross	06	3	Blue Cross, Blue Cross PPO
Commercial insurance company; No-fault; Self-insured, self- administered plan	08, 13, 15	4	Commercial, PPO
HMO (other)	11	5	HMO, PHP, etc.
Self-pay	01	6	Self-pay
No charge	09	7	No charge
	N/A	8	Title V
Workers' Compensation	02	9	Workers' Comp
CHAMPUS/VA	12	10	CHAMPUS, CHAMPVA
Other government; Corrections (federal, state, or local)	07, 14	11	Other Government
Other	10	12	Other
	Blank	(.)	Missing
	Other values	(.A)	Invalid

NEW YORK 1996-1997

Expected Primary and Secondary Payer

PAY1_N and PAY2_N

Source Description	Source Values	Uniform Value	HCUP Description
Medicare, Medicare HMO	03, 16	1	Medicare
Medicaid, Medicaid HMO	04, 17	2	Medicaid
Blue Cross	06	3	Blue Cross, Blue Cross PPO
Commercial insurance company; No-fault; Self-insured, self- administered plan	08, 13, 15	4	Commercial, PPO
HMO (other)	11	5	HMO, PHP, etc.
Self-pay	01	6	Self-pay
No charge	09	7	No charge
	N/A	8	Title V
Workers' Compensation	02	9	Workers' Comp
CHAMPUS/VA	12	10	CHAMPUS, CHAMPVA
Other government; Corrections, federal; Corrections, state; Corrections, local	07, 18, 19, 20	11	Other Government
Other	10	12	Other
	Blank	(.)	Missing
	Other values	(.A)	Invalid

OREGON 1995-1997

Expected Primary and Secondary Payer

PAY1_N and PAY2_N

Source Description	Source Values	Uniform Values	HCUP Description
Medicare	M	1	Medicare
Medicaid; HMO/ Oregon Health Plan (Medicaid)	D, X	2	Medicaid
Blue Cross/Blue Shield	B	3	Blue Cross, Blue Cross PPO
Commercial Insurance; PPO; Self-Insured	I, Y, S	4	Commercial, PPO
HMO/Managed Care; Kaiser Permanente	H, K	5	HMO, PHP, etc.
Self-pay	P	6	Self-pay
Medically Indigent/ Free/Research	Z	7	No charge
Title V	T	8	Title V
Workers' Compensation	W	9	Workers' Comp
CHAMPUS	C	10	CHAMPUS, CHAMPVA
County or State; Managed Assistance; Division of Health Services	E, L, N	11	Other government
Other	O	12	Other
Missing	Blank	(.)	Missing
	Other Values	(.A)	Invalid

SOUTH CAROLINA 1995-1997

Expected Primary and Secondary Payer

PAY1_N and PAY2_N

Source values are not mapped to PAY1_N or PAY2_N.
 PAY1_N and PAY2_N are set to missing (.) on all records.

PAY1 and PAY2

Source Description	Source Values	Uniform Values	HCUP Description
Medicare	02	1	Medicare
Medicaid	03	2	Medicaid
Blue Cross/Commercial/ HMO	04	3	Private insurance, PPO,
HMO			
Self-pay	01	4	Self-pay
	N/A	5	No charge
Workers' Comp; Indigent/Charity; Other government	05, 06, 07.....	6	Other
Missing	08, blank.....	(.)	Missing
	Other	(.A)	Invalid

WASHINGTON 1995-1997

Expected Primary and Secondary Payer

PAY1_N and PAY2_N

Source Description	Source Values	Uniform Values	HCUP Description
Medicare	001	1	Medicare
Medicaid	002	2	Medicaid
	N/A	3	Blue Cross, Blue Cross PPO
Commercial insurance	006	4	Commercial, PPO
HMO	004	5	HMO, PHP, etc.
Self-pay	009	6	Self-pay
Charity care	630	7	No charge
	N/A	8	Title V
Labor and industries/ Workers' Compensation	008	9	Workers' Comp
	N/A	10	CHAMPUS, CHAMPVA
	N/A	11	Other government
Health care service contractors; other sponsored patients	610, 625	12	Other
	Blank	(.)	Missing
	Other Values	(.A)	Invalid

PAY1 and PAY2

If source payer code = 610, then PAY1 = 3 and PAY2 = 3.

Otherwise, use standard PAY1_N to PAY1 and PAY2_N to PAY2 mappings.

WISCONSIN 1995-1997

Expected Primary and Secondary Payer

The pay source information in the Wisconsin inpatient data is coded in two variables. The table below shows the code combinations and their mapping to the HCUP variables PAY1_N and PAY2_N.

WISCONSIN PAY CODES

PAY1_N and PAY2_N		WI PAYER ID Value Description	WI PAYER CATEGORY Value Description
1	Medicare	MED Medicare	01 Fee for service, non-HMO Medicare, or non-HMO Medicaid 02 Alternative health care insurance plans (HMO, PPO, PPA, etc.) 09 Unable to determine insurance type <i>blank</i>
		T19 Wisconsin Medicaid	01 Fee for service, non-HMO Medicare, or non-HMO Medicaid 02 Alternative health care insurance plans (HMO, PPO, PPA, etc.) 09 Unable to determine insurance type <i>blank</i>
		OTH Other Payer	51 Non-Wisconsin Medicaid
3	Blue Cross	nnn Blue Cross (includes 130 & 370)	01 Fee for service, non-HMO Medicare, or non-HMO Medicaid 09 Unable to determine insurance type

WISCONSIN PAY CODES - continued

PAY1_N and PAY2_N	WI PAYER ID		WI PAYER CATEGORY	
	Value	Description	Value	Description
4 Commercial Insurance	WPS	Wisconsin Physicians Service	01	Fee for service, non-HMO Medicare, or non-HMO Medicaid
	OTH	Other Payer	09	Unable to determine insurance type
5 HMO, PHP, etc.	WPS	Wisconsin Physicians Service	11	Commercial or private insurance — fee for service
	OTH	Other Payer	19	Commercial or private insurance — type unknown
	nnn	Blue Cross (includes 130 & 370)	21	Employer self-funded — fee for service
	<i>blank</i>		29	Employer self-funded — type unknown
			31	Other organization self-funded — fee for service
6 Self-pay			39	Other organization self-funded — Unable to determine insurance type
	WPS	Wisconsin Physicians Service	02	Alternative health care insurance plans (HMO, PPO, PPA, etc.)
	OTH	Other Payer	12	Commercial or private insurance — alternative health care insurance plans (HMO, PPO, PPA, etc.)
	nnn	Blue Cross (includes 130 & 370)	22	Employer self-funded — alternative health care insurance plans (HMO, PPO, PPA, etc.)
7 No Charge			32	Other organization self-funded — alternative health care insurance plans (HMO, PPO, PPA, etc.)
	N/A		02	Alternative health care insurance plans (HMO, PPO, PPA, etc.)
			02	Alternative health care insurance plans (HMO, PPO, PPA, etc.)
6 Self-pay	OTH	Other Payer	61	Self-pay
7 No Charge	N/A		N/A	

WISCONSIN PAY CODES - continued

PAY1_N and PAY2_N	WI PAYER ID		WI PAYER CATEGORY	
	Value	Description	Value	Description
8 Title V	N/A		N/A	
9 Workers' Comp	OTH	Other Payer	41	Workers' Comp
10 CHAMPUS, CHAMPVA	130 370	CHAMPUS, CHAMPVA OTH Other Payer	03 55	CHAMPUS, CHAMPVA CHAMPUS Supplement
		Valid beginning 1994: CHA CHAMPUS, CHAMPVA		Any alphanumeric
11 Other Government	OTH	Other Payer	52 53 54 56 59	51.42 / 51.437 / 46.23 Board General Relief WisconCare HIRSP Other government
12 Other	OTH	Other Payer <i>blank</i>	01 98 01	Fee for service, non-HMO Medicare, or non-HMO Medicaid Other Fee for service, non-HMO Medicare, or non-HMO Medicaid
Missing	OTH	Other Payer <i>blank</i>	99 <i>blank</i> <i>blank</i>	Unknown <i>blank</i> <i>blank</i>

WISCONSIN PAY CODES - continued

Additional information from Wisconsin about certain pay codes is as follows:

- *WPS (Wisconsin Physicians Services)*: the state considers this a private carrier.
- *51.42/51.437/46.23 Board*: county boards that administer state funds for mental health, physical disability, and alcohol/drug abuse programs.
- *General Relief*: other state government assistance programs.
- *WisconCare*: a special state program targeting high-need counties.
- *CHAMPUS Supplement*: a federal government program.
- *HIRSP*: high-risk insurance plan funded by assessments on private insurers, and administered by the state Office of the Commissioner of Insurance.